



Department of Administration
Division of Capital Projects and Property Management
Contractors' Registration Board
One Capitol Hill
Providence, Rhode Island 02908-5839
Telephone #: 401-222-1270
Fax #: 401-222-1940

Company Name Change

I hereby agree to accept the responsibility of:

Company Name: _____

Address: _____

Telephone #: _____

Registration # _____

Under this new company:

Name: _____

Address: _____

Telephone #: _____

Registration #: _____

I understand that this registration number was issued under the condition of assuming responsibility of the previous company for a period of one (1) year from that company's expiration date:

Signature: _____

Date: _____